

Lincoln Police Department Thomas K. Casady, Chief of Police 575 South 10th Street Lincoln, Nebraska 68508

402-441-7204 fax: 402-441-8492



MAYOR COLEEN J. SENG

www.ci.lincoln.ne.us

March 30, 2004

Mayor Seng and City Council City of Lincoln City County Building Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Robot Venus Inc., d.b.a. Baciami, 301 North 8<sup>th</sup> Street requesting a class C liquor license.

This location was previously known as Brazenhead Irish Pub which held a class C liquor license.

Shannon Raymer, President has requested that she be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Shannon Raymer was born in Lincoln, Nebraska. She attended Lincoln High School graduating in 1999.

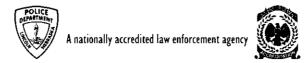
Shannon Raymer employment history is as follows:

Present	Wait Staff, The Dish	Lincoln, NE.
2003 - 2004	Manager, Sher-E-Punjab	Lincoln, NE.
2003 - 2003	Bartender, Crane River	Lincoln, NE
1999 - 2003	Manager, El Sitio	Lincoln, NE.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police

han & lang



## STATE OF NEBRASKA

P.H: 4-12-04



Mike Johanns Governor

> City Clerk of Lincoln City/County Building 555 S 10 Street Lincoln, NE 68508

FILE CITY CLERK'S COPE

'04 MAR 23 PA 2

CITY O March 22, 2004 NEBRASKA NEBRASKA LIQUOR CONTROL COMMISSION Hobert B. Rupe

Executive Director

301 Centennial Mall South, 5th Floor P.O. Box 95046

Lincoln, Nebraska 68509-5046 Phone (402) 471-2571

Fax (402) 471-2814 TRS USER 800 833-7352 (TTY)

web address: http://www.nol.org/home/NLCC/

Robot Venus, Inc A4-031191 Aba Baciami 301 No Pth Street CLass C

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

### TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body,
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS, AND A LICENSE IS EFFECTIVE:

- Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Enclosure Bhonda R. Flower

Commissioner

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Jackie B. Matulka Licensing Division

Bob Logsdon Chairman

R.L. (Dick) Coyne Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4001 REV. 12/99

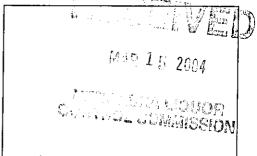
### APPLICATION FOR LICENSE

Nebraska Liquor Control Commission PO Box 95046, 301 Centennial Mall South Lincoln, NE 68509-5046

http://www.nol.org/home/NLCC/

Phone: (402) 471-2571 Fax: (402) 471-2814

INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and



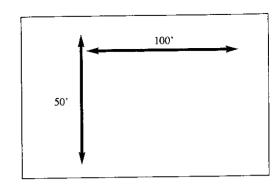
processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders/member holding over 25% stock/interest. 6. All applications must be typewritten or <u>printed</u> clearly. 7. Submit in <u>Triplicate</u>

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH Class of License Registration License Corporate (Check applicable class) Fee Fees Surety Bond A Beer, On Sale Only - Inside Corporate Limits \$45.00 Collected at Local Level exempt Beer, On Sale Only - Outside Corporate Limits \$45.00 Collected at Local Level exempt Beer, Off Sale Only - Indicate Inside or Outside Corporate Limits \$45.00 Collected at Local Level exempt Wine, Beer, On Sale Only - Inside Corporate Limits \$45.00 Collected at Local Level exempt Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits \$45.00 Collected at Local Level exempt D Spirits, Wine, Beer, Off Sale Only – Inside Corporate Limits \$45.00 \$150.00 exempt D1 Spirits, Wine, Beer, Off Sale only - within extraterritorial zoning jurisdiction \$45,00 \$150.00 exempt Spirits, Wine, Beer On & Off Sale – Inside Corporate Limits \$45.00 Collected at Local Level exempt M Bottle Club (Spirits, Wine, Beer, on Sale) \$45.00 Collected at Local Level exempt H Nonprofit Corporation \$45.00 Collected at Local Level exempt K Wine Only, Off Sale \$45.00 Collected at Local Level exempt O Boat \$45.00 \$ 50.00 exempt V Manufacturer of Beer, Wine & Distilled Spirits \$45.00 Varies \$100 to \$1,000 \$10,000 min. X Wholesale Liquor \$45.00 \$500.00 \$ 5,000 min. W Wholesale Beer \$45.00 \$250.00 \$ 5,000 min. Y Farm Winery \$45.00 \$250.00 \$ 1,000 min. L Craft Brewery (Brew Pub) \$45.00 \$250.00 \$ 1.000 min. TYPE OF APPLICATION CORPORATE SURETY BOND INFORMATION Bond Company - for Classes L V W X Y only Type of application being applied for (place appropriate number in box) 1= Individual License requires Form 1 to be attached. 2= Partnership License requires Start Date Month/Day/Year **Bond Number** Form 2 to be attached. 3= Corporate License requires Form 3 and 4 and Manager Application be attached. SECTION A - LOCATION INFORMATION - Must be completed by all applicants Trade Name (name of business) Telephone Number at premise to be licensed KWIAMI HOT NAILXBLE 1) Street Address of Proposed licensed premise 2) Mailing Address for receipt of 301 N 87 57 Liquor Control Commission mailings 1830 E St #5 Is this located inside the city limits Circle (YES LNO) City County Zip Code City County Zip Code LANCHOTER 68508 68503 INCOLN LAMCHOTEK INCON

### DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

ΝĄ

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.



43'

Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement approximately 30' x 50' at the East end.

FERST FLOOR OF BURLDAME 43' x 90'

SECTION B A CHARLES SEASON OF SEASON	TION:	REQUIE	ED <sub>res</sub>
是是一种的人,但是一种,我们就是一种的人,我们就是一种,我们就是一种的人的,我们就是一种的人的,我们就是一种的人的人,也是一种的人,也是一种的人,也是一种的人, 第一种	Yes	No	Explanation/Comments
1. READ CAREFULLY. Answer completely and accurately.  Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor or violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.			OMAHA, NE SHOI

	Yes	aNo :		Aplana	on∕€omin	ents R
2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).	X					
3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.		X				
4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.	X	X	KAT	XE HLYN	HELL	WEG ER
5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.		$\times$	-	-		
6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.	!	$\times$				
7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?		X	·			
8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.		X				
9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.		X		-		
10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.	UH OH	HOW TON	BANK	AYN	T EUS 1 <b>EK</b>	Γ
11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.		,	4/L			
12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.	5th	MNO t	1 DA	YMEI 5	2	
13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.	SE	· A	TTACI	HMEN	T	
14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed).						
15. When do you intend to open for business?	5/1	120	504			

16. List the principal residence for the past 10 years for all persons req	uired to	sign appli	cation	. If necess	ary attach a separate
NAME		ROM		TO EAR)	RESIDENCE (CITY, STATE)
SHANNON RAYMER	(1	(EAR)		EAR)	SIMIL)
1830 E ST # 5	7/0	73	Pe	ESEAT	LINCON, NE
1223 N 9TH #108	81	02	7	03	LINCOUN, ME
1106 E 5r #3	12/	01_	7	02	LENCOLH, ME
3666 IRONWOOD CT	5	01	12	01	POCHEOTER, ML
1903 MADSACHUSETTS ST #12	8/	$\infty$	5	101	LAWRENCE KS
121 W 14TH ST APT F	1/0	00	$\mathcal{D}$	100	LAWRENCE, KS
McCOLLUTY DORM UNTUFFSITY OF	KANE	A5614	91	2/44	LAWRENCE K
		***			,

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25% of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

directors and spouses must sign. Fun names only, mich	is not acceptable.
sign here sign here sign here	sign here sign here sign here sign here sign here
Subscribed in my presence and sworn to before me this	10th day of March, 2001
In compliance with ADA this	GENERAL NOTARY - State of Nebraska  JAMIE L. JOHNSON  My Comm. Exp. Oct. 23, 2054

application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

sign

Notary Public Signature

## Application for Corporate Manager

### \*Must Be A Nebraska Resident\*

### Please submit in Triplicate

Return to:

Nebraska Liquor Control Commission, PO Box 95046

301 Centennial Mall So., Lincoln NE 68509

Phone: (402) 471-2571 Fax: (402) 471-2814

Web address: http://www.nol.org/home/NLCC/

MD9 15 2004

LIQUOR LICENSE INFORMATION NAME OF LICENSED CORPORATION CLASS & LICENSE NUMBER ROBOT VENUD, INC. TRADE NAME OF LICENSED PREMISE BACTAME STREET ADDRESS OF LICENSED PREMISE CITY COUNTY ZIP CODE 301 N 624 LIAKOLU ANICHOTER 6<u>4</u>569 On behalf of the corporation, I designate this individual as corporate manager. Signature of Corporate President/CEO: APPLICANT INFORMATION (MUST BE 21 OR OVER) NAME (LAST, FIRST, MIDDLE, MAIDEN) SEX SOCIAL SECURITY NUMBER PLACE OF BIRTH F) M THANKON MAZA LINCOU, UF HOME STREET ADDRESS CITY COUNTY STATE ZIP CODE 1830 E St #5 INCON ALLCHOTEL ME HOME TELEPHONE NUMBER BUSINESS TELEPHONE NUMBER DRIVERS LICENSE NUMBER & STATE (402 730-9165 SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE) FULL NAME (LAST, FIRST, MIDDLE, MAIDEN) SOCIAL SECURITY NUMBER DRIVERS LICENSE NUMBER & STATE DATE OF BIRTH: PLACE OF BIRTH 1. READ CAREFULLY. Answer completely and accurately. Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law, or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name. ☐ Yes 🗘 No

2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number, and date.

 $\square_{\rm YES}$ 

3. Have you or your spouse ever made a compromise settlement YES NO	at for violation of such laws?
4. Do you, as a manager, have all the qualifications required by Nebraska Liquor Control Act (§53-131.01)  ☐YES ☐NO	by any person entitled to hold a Nebraska Liquor License?
5. Have you filed fingerprint cards and <b>PROPER FEES</b> (if ch	neck, make out to the NE State Patrol), with this application?
RESIDENCES FOR THE PAST 10 YEAR	RS, APPLICANT AND SPOUSE MUST COMPLETE
APPLICANT: CITY & STATE  THANKON ZAYMEZ  FROM	SPOUSE: CITY & STATE TO SPOUSE: CITY & STATE FROM TO
1830 E ST#5   INCOUNTY 7/03 F	PERSTATE
1223 N 9TH LINKOUN, MF 8/02 -	703
1106 E ST#3 LINCOLY, NE 12/01-	
3666 IRONWOOD G. BOTHESTER, MV5/01/12	
	IST LAST TWO EMPLOYERS
YEAR NAME OF EMPLOYER FROM TO	NAME OF SUPERVISOR TELEPHONE NUMBER
2003 PRESENT SHEEL E- PUNNAB	BHUPENDER SENGH (402) 477-3090
2002 2003 CHANTE PEUEL BREW	)PUB KILSTENIA TEEBEL (402)416/ =7553
PERSONAL OATH AND CONSENT OF INVEST	IGATION - MUST BE SIGNED BY APPLICANT & SPOUSE
STATE OF NEBRASKA )	
COUNTY OF ) SS	
The above individual(s), being first duly sworn upon oath, deposes and states tha application, that said application has been read and that the contents thereof and all the applicant(s) shall be deemed guilty of perjury and subject to penalties provided	at the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing I statements contained therein are true. If any false statement is made in any part of this application, I by law. (Sec. §53-131.01) Nebraska Liquor Control Act.
Federal), and bank or lending institution records, and said applicant and spouse wai	nd including all records of every kind and description including police records, tax records (State and ive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor ion to the Nebraska Liquor Control Commission. If spouse has NO interest directly or indirectly, an
The undersigned understand and acknowledge that any license issued, based on the is incomplete and inaccurate.	information submitted in this application, is subject to cancellation if the information contained herein
Man Nem	
Signature of Applicant	Signature of Spouse (if applicable)
Subscribed in my presence and swom to before me this 10,40 day of 10,40	Subscribed in my presence and sworn to before me thisday of
Notary Signature & Seal	Notary Signature & Seal

GENERAL NOTARY - State of Nebraska

JAMIE L. JOHNSON

My Comm. Exp. Oct. 23, 200

## Corporation/LLC Application for License

Nebraska Liquor Control Commission

## INSTRUCTIONS:

- 1) Application and application for manager must be typewritten and subm 2) Fingerprint cards (2 cards per person) must be submitted for: a) each s of the stock, b) chief executive officer, c) proposed manager and d) al
- 3) Information regarding spouses must be completed

nitted in triplicate stockholder owning over 25% Il spouses	2 - Form 3
The state of the s	

ome Telephone Number	Home Telephone Number	Zip Code (68503	State		City
State CIE					Home Address (1) 1830 E St # 5
rth Social Security Number	Date of Birth	DENT	Title PRESTDENT		Name SHALINON RAYMER
	FFICER	IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OF	ЛЕ О <b>Г</b> ТНЕ СНІ	ON LIST THE NA!	IN THIS SECTI
	HYMER	Name of Proposed Manager  OHTANICON  A	Name of Pr		Name of Registered Agent  OHANNON ZAYMER
Zip Code 68308		State	STER	County	City
Corporate Telephone Number (402) 730-9165		Mailing address for receipt of Liquor Control Commission Mailings 1830 € 5+ #5	Mailing address for receipt of Liquor Control Commission N		Corporate Street Address (1) 301 ~ 8 <sup>TH</sup> ST
Total Number of Shares (if corporation)	al Number of Sha	Tot	oration	f Articles of Incorp	Name of Corporation That Will Hold License. Attach copy of Articles of Incorporation

# Corporation/LLC Application for License - Form 3

		į		Spouse Name
				NAME
				Spouse Name
				NAME
				Spouse Name
				NAME
				Spouse Name
				NAME
				Spouse Name
ग 50	VECE PRESIDENT SC			NAME JASON ABLES (ALLAN)
				Spouse Name
O,	PRESIDENT			NAME SHANHON RAYMER (MARA)
Number of Shares/ %	Title	Date of Birth	Social Security Number	Name of Officers. Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases
	USES	BERS AND SPOI	RS, STOCKHOLDERS, MEM	PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES

(If Necessary, Continue on Separate Sheet)

# Corporation/LLC Application for License - Form 3

Nebraska Liquor Control Commission

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J YES
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Corporation
LC controlled by another (
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controlle
LC cc
ation/L
Corpora
Is this (
_

Name of Control Corporation

as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock If YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LLC. Any applicant who has a Corporation

Please indicate below your corporate tax year with the IRS

Starting Date: 3/12/04 Ending Date: 3/11/05

STATE OF NIPYASKR

| LANCASEY County | ss.

Notan Proble Premorphed Stall of Nebraska JAMIE L. JOHNSON

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format

PRESIDENT/MEMBER

SECRETARY/MEMBER

FORM 35-4183 Page 3 REV 02/01